

SB 1183 (2021)

Committee: Senate State Affairs
Date: March 17, 2021
Position: OPPOSE

Chairperson Lodge, members of the committee, my name is Mistie DelliCarpini-Tolman. I am the State Director for Planned Parenthood Votes in Idaho. I am here today to oppose Senate Bill 1183.

Planned Parenthood provides high-quality, evidence-based health care to patients in Idaho and across the country. Our mission is to support the health and wellbeing of all Idahoans, and to ensure that all Idahoans have access to high quality, safe, and compassionate medical care.

SB 1183 is a cynical and callous attempt to end abortion access in Idaho. This bill would enshrine into Idaho law an extreme and unconstitutional restriction on abortion starting at approximately six weeks of pregnancy--**before most people even know that they are pregnant.** Put another way, this bill could take away a person's right to make their own medical decisions before they even know that they have a decision to make.

Forty-eight years ago in *Roe v. Wade*, the Supreme Court held that states may not ban abortion before viability for any reason. The Supreme Court has repeatedly reaffirmed this conclusion, including in *Planned Parenthood v. Casey* in 1992 and most recently in *June Medical Services v. Russo*, in 2020. **A ban on abortion before viability, regardless of any exceptions, is blatantly unconstitutional, and six-week bans on abortion in states like Kentucky, Mississippi, North Dakota, Iowa, Ohio, and Tennessee have been struck down as such every time they have been challenged.**

Recognizing that Supreme Court precedent and the Constitution of the United States do not permit states to ban abortion before viability, the sponsors of this bill seek to pass a ban on abortion at six weeks of pregnancy that would go into effect if a federal Court of Appeals were to ever uphold a similarly stringent and dangerous ban from another state. **This is a nefarious attempt to side-step federal law and Supreme Court precedent by passing a law known to be unconstitutional, and it runs afoul of the foundational principles of our Constitution.**

What's more, this bill would force all patients seeking an abortion to undergo a mandatory transvaginal ultrasound. That's because this bill would ban abortion so early in pregnancy, a transvaginal ultrasound would be the only way to determine gestational age. Forcing patients to undergo a medically unnecessary procedure is unethical and demeaning, but that's exactly what this bill would do.

In addition to being unconstitutional, bans on abortion are deeply unpopular and do not reflect the will of voters. Seventy-two percent of Americans do not want to see *Roe v. Wade* overturned.¹ This includes a majority of Democrats, Republicans, and Independents. Nationwide, polling has shown that a majority of Americans--including in Idaho--believe that abortion should be safe and legal. This bill is in direct opposition to that belief, and if the six-week ban goes into effect it will hurt Idaho families.

¹ PerryUndem Research Communication, 45 Years After *Roe v. Wade* (Jan. 11, 2018), available at <https://view.publitas.com/perryundem-research-communication/perryundem-report-on-public-opinion-toward-abortion/page/9>.

Evidence confirms that banning abortion is devastating for public health and family welfare. For instance, according to a study published in 2020 by the National Bureau of Economic Research, when a person is unable to secure an abortion they need, they and their child are four times more likely to end up living in poverty going forward than they would have been if they had been able to access abortion. For survivors of domestic violence, an inability to access abortion can make it more difficult for a person to leave their abuser. These burdens are exacerbated for women of color and immigrants, who already experience disproportionate levels of negative health outcomes and lack of access to medical care in Idaho.

Access to abortion is critical to ensure that women can live full and fulfilling lives, with dignity, autonomy, and social and economic equality. As one recent study concluded, “women who receive a wanted abortion are better able to aspire for the future than women who are denied a wanted abortion and must carry an unwanted pregnancy to term.”²

For these reasons and others, major medical organizations like the American College of Obstetrics and Gynecologists, the American Medical Association, the American Academy of Family Physicians, the American Osteopathic Association, and the American Academy of Pediatrics have affirmed that “reproductive healthcare is essential to a woman’s overall health, and access to abortion is an important component of reproductive healthcare.”³

SB 1183 seeks to deny people in Idaho the dignity and autonomy to make their own reproductive health decisions, it flouts the United States Constitution and the Supreme Court, and, if it goes into effect, it will cause untold harm to women and families in Idaho. Let’s also be crystal clear about who this bill would harm the most: people with means will always be able to travel to get an abortion. But people with low incomes – who are disproportionately likely to be people of color because of decades of inequitable policies – will have no options. This bill punishes people living in poverty and does nothing to improve health outcomes for those who need it the most, and as I previously noted, perpetuates the cycle of poverty.

We have seen multiple versions of this extreme abortion ban this session, and this is the worst yet. This version would create even more barriers for patients seeking abortion due to rape or incest. It removes language that allowed for exceptions when victims are unable to report a rape to law enforcement, even though we know that the vast majority of assault survivors do not report their assault to the police for a variety of reasons related to their mental health, safety, and wellbeing. It also adds extreme punishments for medical providers, making abortion after approximately six weeks a felony punishable by a minimum of two years in prison. This goes far beyond the previous version and criminalizes the provision of basic medical care. The changes in this version of the bill make it clear that the attacks on Idahoan’s right to access abortion are only getting more extreme and out of touch with what Idahoans truly want and need.

Particularly right now, as our state battles the effects of the COVID-19 pandemic, the people of Idaho deserve better. Our legislators should be pursuing policies that lift up our communities, not policies that will further damage the public health in this state.

² Ushma D. Upadhyay et al., *The Effect of Abortion on Having and Achieving Aspirational One-Year Plans*, 15 BMC Women’s Health 102, (2015).

³ Br. of Amici Curiae ACOG, AMA, AAFP, AOA, & AAP in Supp. of Pet’rs at 4, *Whole Woman’s Health v. Hellerstedt*, 136 S. CT 2292 (2016) (No. 15-724), 2016 WL 74948 at *4.

Thank you for the opportunity to testify. We urge the committee to oppose SB 1183.